

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 09/310,294 Confirmation No.: 8643  
Applicant : Yonah Schmeidler, et al.  
Filed : 05/12/1999  
Group Art Unit : 2131  
Examiner : Taghi T. Arani  
Docket No. : 111283.137 US2  
Customer No. : 23483  
  
Title : Method and Apparatus for Secure Content Delivery Over  
Broadband Access Networks

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT**

Commissioner:

Pursuant to the duty of disclosure under 37 C.F.R. §§ 1.56, 1.97 and 1.98, Applicant brings to the attention of the Examiner the documents listed on the attached Form PTO-1449.

This Information Disclosure Statement is being filed after the mailing date of a final Office Action and on or before payment of the issue fee. Please charge the \$180 fee to our Deposit Account No. 08-0219.

Applicant requests that the Examiner initial and return a copy of the enclosed Form PTO-1449 with the next communication.

Respectfully submitted,

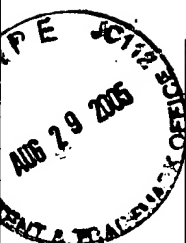
Date: August 25, 2005

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08/30/2005 MAHME1 00000023 080219 09310294

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Subt. For, PTO-1449				Docket Number	Application Number
<b>INFORMATION DISCLOSURE IN AN APPLICATION</b>  (Use several sheets if necessary)				111283.137US2	09/310,294
				Applicant <b>Schmeidler et al.</b>	
				Filing Date <b>May 12, 1999</b>	Group Art Unit <b>2131</b>
Sheet	1	OF	1		

U.S. Patent Documents				
Examiner Initial	Document Number	Publn. Date mm-dd-yyyy	Name Of Patentee Or Applicant Of Cited Documents	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear
	US-5,757,908	May 26, 1998	Cooper et al.	
	US-5,812,776	Sep. 22, 1998	Gifford	
	US-5,971,277	Oct. 26, 1999	Cragun et al.	
	US-6,065,117	May 16, 2000	White	

Foreign Patent Documents					
Examiner Initial	Cite No.	Foreign Patent Document	Publn. Date mm-dd-yyyy	Country	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear
		Country Code-Number-Kind			

Examiner's Initial	Other Documents (Including Author, Title, Date Pertinent Pages, Etc.)	

EXAMINER	DATE CONSIDERED
EXAMINER: Initial if citation is considered, whether or not citation is in conformance with MPEP § 609: Draw Line through citation if not conformance and not considered. Include copy with next communication to applicant.	



Subt. For, PTO-1449

**INFORMATION DISCLOSURE  
IN AN APPLICATION***(Use several sheets if necessary)*Docket Number  
**111283.137US2**Application Number  
**09/310,294**Applicant  
**Schmeidler et al.**Filing Date  
**May 12, 1999**Group Art Unit  
**2131**Sheet **1** OF **1****U.S. Patent Documents**

Examiner Initial	Document Number	Publ. Date mm-dd-yyyy	Name Of Patentee Or Applicant Of Cited Documents	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear
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**Foreign Patent Documents**

Examiner Initial	Cite No.	Foreign Patent Document Country Code-Number-Kind	Publ. Date mm-dd-yyyy	Country	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear

Examiner's  
Initial**Other Documents (Including Author, Title, Date Pertinent Pages, Etc.)**


EXAMINER

DATE CONSIDERED

**EXAMINER:** Initial if citation is considered, whether or not citation is in conformance with MPEP § 609: Draw Line through citation if not conformance and not considered. Include copy with next communication to applicant.



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<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b>		<b>Complete if Known</b>	
<b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		Application Number	09/310294-Conf. #8643
		Filing Date	May 12, 1999
		First Named Inventor	Yonah SCHMEIDLER
		Examiner Name	T. T. Arani
		Art Unit	2131
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	0111283.00137US2
<b>TOTAL AMOUNT OF PAYMENT</b>		<b>(\$)</b>	<b>180.00</b>

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify):	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: <u>08-0219</u> Deposit Account Name: <u>Wilmer Cutler Pickering Hale and Dorr LLP</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, <b>except for the filing fee</b>
<input type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		
		<b>Small Entity</b>		<b>Small Entity</b>		<b>Small Entity</b>	
<b>Application Type</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fees Paid (\$)</b>
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
<b>2. EXCESS CLAIM FEES</b>							
							<b>Small Entity</b>
<b>Fee Description</b>							<b>Fee (\$)</b>
Each claim over 20 (including Reissues)							50
Each independent claim over 3 (including Reissues)							200
Multiple dependent claims							360
<b>Total Claims</b>							
<b>Extra Claims</b>							
<b>Fee (\$)</b>							
<b>Fee Paid (\$)</b>							
<b>Multiple Dependent Claims</b>							
<b>Fee (\$)</b>							
<b>Fee Paid (\$)</b>							
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<b>Total Sheets</b>		<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>		<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	
- 100 =		/50	(round up to a whole number) x		=		
<b>4. OTHER FEE(S)</b>							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): <u>1806 Submission of an Information Disclosure Statement</u>							<u>180.00</u>

<b>SUBMITTED BY</b>			
Signature	<u>Monica Grewal</u>	Registration No. (Attorney/Agent)	40,056
Name (Print/Type)	Monica Grewal	Telephone	(617) 526-6000
		Date	August 25, 2005

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	
Dated: August 25, 2005	Signature: <u>Lisa A. Calder</u> (Lisa A. Calder)